

POSITION	INITIALS	ID NO.	DATE
	<i>AS</i>		<i>08/04/00</i>
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>Dr</i>	<i>32</i>	<i>8/10</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>AB</i>	<i>54222</i>	<i>9-11-00</i>

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
-	(Through numeral) Canceled	A	Appeal
+	Restricted	O	Objected

Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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